If your primary language is not English, Medicaid provides qualified interpreters and other free language services. If you need these services, please call 1-866-608-9422.

# **Utah Medicaid Notice of Privacy Practices**

# Utah Department of Health and Human Services (DHHS) Division of Integrated Healthcare (DIH)

Effective November 1, 2024

### Our privacy responsibilities - Utah Medicaid is required by law to:

- Maintain the privacy of your health information.
- Tell you the ways we may use and share your health information.
- Notify you if your health information was affected by a breach.
- Follow the terms of the notice currently in effect.

#### Your rights with respect to your protected health information (PHI):

- Inspect and get a copy of your health information. Fees may apply. \*
- Ask us to correct or add to your health information. \*
- Ask us to limit how we share your health information.\*
- Request that we use a specific telephone number or address to communicate with you. \*
- Request an accounting of disclosures of your health information. Ask us how. Fees may apply. \*
- Request a paper copy of this notice.
- Choose someone to act for you.
- File a complaint with our Privacy and Security Office if you think your privacy rights have been violated.
- Change your participation in the cHIE by calling (877) 693-3071 or emailing chie@uhin.org.

\* Must be requested in writing.

#### How we use and disclose your PHI:

Treatment: Referral, provide, coordinate, or manage health care services, consultation, support

**Payment**: Check eligibility for Medicaid/CHIP, billing and collection, review medical necessity, give prior authorization for services

**Health care operations:** Quality assessment and improvement, evaluate employee performance, train staff, conduct the business of our organization

Informational purposes: Give you helpful information about health plan choices and program benefit updates

## Additional uses and disclosures of your health information:

- To comply with federal and state law.
- To provide public health and safety services and information.
- To our business associates who are subject to HIPAA.
- To report communicable diseases, traumatic injuries, or vital statistics, such as births or deaths.
- To report child or elder abuse.
- To researchers who follow all data protection law.

- To address workers' compensation, law enforcement and government requests.
- To respond to lawsuits and legal actions.
- To report crime-related injuries, such as gunshot or knife wounds.
- For national security.
- To a medical device's manufacturer, as required by the FDA, to monitor the safety of a medical device.
- To work with the medical examiner.



#### You must give signed authorization for these uses and disclosures:

- Sell your identifiable health information.
- Share your psychotherapy notes with a third party who is not part of your care.
- Share any of your health information with marketing companies.
- You may revoke your authorization at any time with a written statement.

#### \*\*New protections for the use or disclosure of PHI\*\*

#### Substance Use Disorder (SUD) and Mental Health Patient Records - 89 FR 12472

- 1. Patients receiving treatment for substance use disorders (SUD) and mental health conditions may now sign a single consent for all future uses and disclosures for treatment, payment, and health care operations.
- 2. When a patient signs this consent, all HIPAA covered entities and business associates may redisclose their records as they would normally do under HIPAA.
- 3. SUD and mental health records that are de-identified according to the standards in the HIPAA Privacy Rule may be disclosed to public health authorities without patient consent.
- 4. The use of SUD and mental health records requested to be used in civil, criminal, administrative, and legislative proceedings against patients, is restricted to use ONLY with patient consent or a court order.

#### HIPAA Privacy Rule to Support Reproductive Health Care Privacy - 89 FR 32976

- 1. It is illegal for an individual's PHI to be used or disclosed for the purpose of investigating, or arresting any person for asking for, finding, or providing reproductive health care that is legally available.
- 2. If Medicaid receives a request for PHI that may be related to a person's reproductive health care, Medicaid is required to obtain a signed, written guarantee that the use or disclosure is not to be used against the individual for illegal purposes.

**Example:** The new requirements would apply if, for example, a patient lives in a state where certain abortions are illegal, and the patient obtained such an abortion in another state where it was legal, and a covered entity received a request for that patient's reproductive PHI.

#### **Contact us**

If you have questions about access to your health information, would like further information about your privacy rights, or are concerned that your privacy rights have been violated, please contact the **DIH Privacy Officer** at:

- 1. dih\_datasecurity@utah.gov
- 2. DIH Privacy and Security Office · PO Box 143102 · Salt Lake City, Utah · 84114-3101
- 3. (385) 290-5555

We investigate all complaints and do not retaliate against you for filing a complaint. You may also file a written complaint with the Office of Civil Rights at the following address:

Office of Civil Rights 200 Independence Avenue S. W. Room 509F HHH Bldg. Washington, DC 20201

<sup>&</sup>lt;sup>1</sup>We reserve the right to make changes to this notice at any time and make the new privacy practices effective for all information we maintain. Current notices will be posted in DIH offices and on our website, <u>https://medicaid.utah.gov/hipaa.</u> You may also request a copy of any notice from your DIH Privacy Officer.

<sup>&</sup>lt;sup>2</sup>For more information on these rights go to https://medicaid.utah.gov/hipaa or contact a health program representative at 1-866-608-9422 or at HPR@utah.gov.